

# **Postpartum and Mental Health Subgroup Maternal Health Advisory Group**



**July 18, 2022**

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# As you Enter the Meeting...

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- **Introductions:** Please place your name (with your title and organization, if you are affiliated with one) into the Chat box as we come in.
  - If you are a member of the Maternal Health Advisory Group, say so
- **Mailing List:** If you are not already receiving a calendar invite and email from [dhcf.maternalhealth@dc.gov](mailto:dhcf.maternalhealth@dc.gov) about DHCF Maternal Health Projects and wish to be on the list to do so, please send an email to that address.
- **Doula Enrollment and Billing Subgroup:** If you want to participate in the Doula Enrollment and Billing Subgroup and aren't already enrolled, sign up now! Link here and chat: <https://forms.gle/ZQoZCGKkCWqbA6ex9>
- **DHCF Website:** Please see the following website for information on maternal health policymaking at DHCF and for past and future meetings: <https://dhcf.dc.gov/publication/maternal-health-projects>
- **FYI on Meeting Recording:** This meeting will be recorded and posted online. You can find recordings of past Maternal Health Advisory Group meetings on the website.

# Presentation and Meeting Overview

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- **Purpose of Meeting:** *Follow up on items related to doula services and postpartum health and ask the group for input on doula reimbursement and billing.*
- **Meeting Agenda**
  - **Part I: Background on DHCF and Maternal Health Projects**
  - **Part II: Maternal Mental Health Services Through DHCF and DBH**
    - Current Medicaid Behavioral Health Services
    - DC Family Support and Wellness Program
    - Parent Infant Early Childhood Enhancement Program (P.I.E.C.E.) & Physician's Practice Group
  - **Part III: Stakeholder Input on Maternal Mental Health Improvements**
    - Provider Knowledge: Maternal Mental Health Services
    - Provider Experience: Maternal Mental Health Services
    - Open Question: Opportunities to Improve Maternal Mental Health
  - **Part IV: Wrap up and Next Steps**

# Purpose of Maternal Health Advisory Group and Subgroup

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## Maternal Health Advisory Group Purpose:

- Take public input on the service array and coverage needed to improve maternal health through DHCF programs.
- Advise DHCF on training, public outreach, program support, reimbursement, and **other items related to maternal health.**

## Subgroup on Postpartum and Mental Health Purpose:

- Develop and disseminate information on postpartum health
- Develop and disseminate knowledge on behavioral health issues to doulas on postpartum mental health
- Take public input on the service array and coverage needed to improve maternal health through DHCF programs.

# Maternal Health at DHCF: Current Eligibility and Services

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- **Eligibility**

- **District of Columbia Medicaid** provides medical coverage to pregnant women who are District residents with eligible immigration status and income up to **324% of the federal poverty level**.
  - Medicaid eligibility starts when a woman is found to be pregnant and continues **365 days postpartum**.
  - District adopted the American Rescue Plan Act of 2021 option **to extend coverage for postpartum coverage to 365 days postpartum**.
- **Alliance & Immigrant Children's Programs** cover District residents (regardless of immigration status) with incomes up to **215% of the federal poverty level**

- **Services**

- Core Services
  - Doctor visits, Hospitalization, Eye care, Ambulatory surgical center, Medically necessary transportation, Dental services and related treatment, Dialysis services, Durable medical equipment, Emergency ambulance service, Hospice services, Laboratory services, Radiology, Medical supplies, **Mental health services**, Physician services, Nurse practitioner services, Home and Community Based Services (HCBS);
  - Pregnancy, labor, and delivery and any complications that may occur during pregnancy, as well as postnatal care
- Services Available Through Managed Care Coverage
  - Care Coordination
  - **Doula services** provided as a value-added service by some MCOs

# Background: Authorization of Doula Services Through Medicaid

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- D.C. Official Code § 3-1206.72, or the Budget Support Act of 2022 (BSA) requires DHCF to submit a Medicaid State Plan Amendment to the Centers for Medicare and Medicaid Services by September 30, 2022 that establishes doula services under the Medicaid program, effective October 1, 2022.
  - **DHCF has drafted the SPA and will submit it to CMS in the next week**
- DHCF is required to establish processes for billing and reimbursement of doula services “in consultation with organizations providing doula services and other relevant entities,” including:
  - Setting a reasonable number of doula visits to be reimbursed during the pregnancy and postpartum period.
  - Setting competitive reimbursement rates.
  - Developing program support and training for doula service providers on billing.
  - Assessing the viability of doula incentive payments for patient postpartum provider visits.

# BACKGROUND: Expansion of Postpartum Medicaid Coverage

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- Section 9812 of the American Rescue Plan Act of 2021 adds a new section 1902(e)(16) to the Social Security Act to extend postpartum coverage
  - States have the option to extend postpartum continuous coverage to include a period from the last day of pregnancy to the last day of the month in which the 12-month period ends.
  - Would provide **Full Medicaid benefits** during pregnancy and the 12-month postpartum period.
  - The option begins on April 1, 2022 and is authorized through March 30, 2027.
  - **As required in District legislation, DHCF applied for this extension and received approval from CMS**
    - **Effective as of April 1, 2022**

# BACKGROUND: Eligibility for the Postpartum Eligibility Extension

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- **Eligible Participants**

- Current enrollees who are pregnant on or after April 1, 2022 (the effective date of the SPA) and current and new beneficiaries who enroll based on pregnancy.
- Current enrollees who were receiving Medicaid or CHIP, **in the District**, while pregnant, who are no longer pregnant when the SPA became effective on April 1, 2022 but are still within the 12-month postpartum period.
- Individuals who apply for Medicaid after their pregnancy ends but who received Medicaid covered services, **in the District**, while pregnant on or after the effective date of the SPA if those services were received during a period of retroactive eligibility.



# NEXT SECTION: Mental Health Services Available Through DBH and DHCF

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- **Purpose**

- Inform doulas and maternal health stakeholders about the behavioral health system in the District to inform future practice
  - This presentation does **NOT** constitute formal training or continuing education

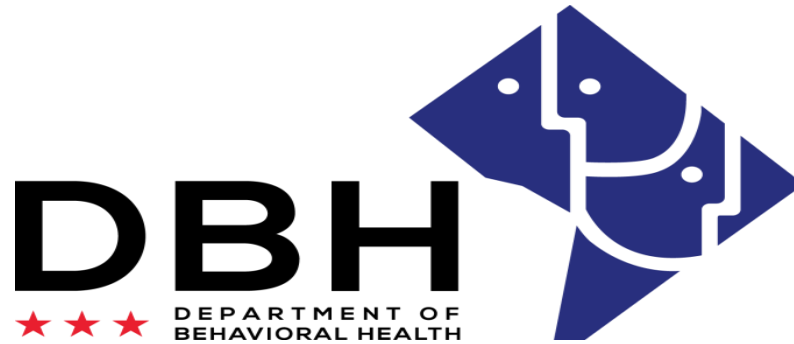
- **Key Considerations for Today**

- Primary care providers should screen after pregnancy for behavioral health issues
- There are many mental health providers outside of the DBH network
  - Primary care clinics
  - Independent practitioners
  - Behavioral health services available beyond DHCF health insurance and DBH
- DC Health will create training and standards for doula practice that **MAY** affect behavioral health referrals and screening

# Current Medicaid Behavioral Health Services

Services Currently Carved Out					Services Currently Carved In
MHRS/CSA (DBH Ch. 34 certified providers)	Diagnostic/Assessment	Medication/Somatic Treatment	Counseling	Community Support	Any medically necessary clinic - based (i.e., FSMHC, FQHC, etc.) mental health or substance use service
	Assertive Community Treatment (ACT)	Community Based Intervention (CBI) (Level 1: Multisystemic Therapy (MST); Levels 2 and 3; and Level 4: Functional Family Therapy (FFT))	Rehabilitation Day Services	Intensive Day Treatment	
	Therapeutic Supported Employment Services for Mental Health	Child-Parent Psychotherapy for Family Violence (CPP-FV)	Trauma -Focused Cognitive Behavioral Therapy (TF-CBT)	Crisis/Emergency Services	In-lieu of services (i.e., IMD stays ≤ 15days in a calendar month), excluding Room & Board
Adult Substance Abuse Rehabilitative Services (ASARS) (DBH Ch. 63 certified providers)	Assessment/ Diagnostic and Treatment Planning	Clinical Care Coordination	Crisis Intervention	Substance Abuse Counseling	
	Short-Term Medically Monitored Intensive Withdrawal Management (MMIWM) in non-IMD residential treatment settings	Medication Management	Opioid Treatment Program Services (i.e., medication - assisted treatment with methadone)		Inpatient hospital MH/SUD services (up to sixty (60) days for inpatient psychiatric stays)
1115 Behavioral Health Demonstration Waiver Services	Psychosocial Rehabilitation Clubhouse	Trauma Recovery and Empowerment Model (TREM)	Trauma Systems Therapy (TST)	Vocational Supported Employment for Mental Health	MH/SUD pharmacy benefits, excluding Methadone administration and related services when provided by a DBH certified Methadone provider
	Vocational and Therapeutic Supported Employment for SUD	Recovery Support Services for SUD	Residential SUD Treatment in IMDs for individuals ages 21-64, where a stay in calendar month exceeds 15 days	Inpatient hospital services in IMDs for individuals ages 21-64, where a stay in calendar month exceeds 15 days	
	MMIWM in IMDs for individuals ages 21-64, where a stay in calendar month exceeds 15 days	Crisis Stabilization (CPEP; Psychiatric Crisis Stabilization Programs; Youth Mobile Crisis Intervention; and Adult Mobile Crisis and Behavioral Health Outreach)	Transition Planning Services		MH/SUD services provided by psychologists or other licensed behavioral health practitioners

# DC Family Support and Wellness Program



**Department of Behavioral Health**  
**Ghislaine Toussaint-Green**  
**7/18/22**

One Agency. One



**District of Columbia Department of Behavioral Health**

# Background Information

The Family Wellness and Support Program is an enhancement of the current DBH Parent Support Program launched on September 2, 2020, in response to the multiple stressors and challenges parents were facing from the COVID-19 pandemic

The DC Department of Behavioral Health (DBH) was subsequently awarded funds to expand wellness supports to parents and caregivers across the city.

# Components of the Parent Support Program

**“Wellness Wednesdays”** – On-line parent support group which promotes discussion around self-care and ways to manage the demands of parenting, the responsibilities of work, distance learning and how these stressors impact the family

- Weekly on Wednesdays @ 5:30pm-6:30pm
- English and Spanish presentations simultaneously
- Parents can share experiences and ask questions of clinicians who work in schools and child development centers
- Discussions are recorded and placed in DBH’s On-demand Library

**Individualized Consultation** – Parents can contact the Access Helpline for help and receive brief counseling and consultation services from licensed clinicians (1-888-793-4357):

- Help with behavioral management or to establish routines with children
- How to cope with stress
- Services are provided via telephone with audio only or via visual telehealth applications
- Up to three visits are available at no charge.
- If needed, clinicians can refer for additional services

**On-Demand Library & Weekly Parenting Tips** – features Wellness Wednesdays group discussions, multiple virtual workshops and videos that can be viewed anytime at your convenience:

- provides tools for self-care and managing mental health
- information on social-emotional development
- activities for children ages Pre-K thru high school
- community resources and Weekly Tips from Wellness Wednesdays discussions
- Parent Support Program: <https://dbh.dc.gov/service/parent-support-program>



# Wellness Wednesday

- English language Link: [https:// bit.ly/2Kr4PDk](https://bit.ly/2Kr4PDk)  
Password: WW20
- Spanish language link: <https://bit.ly/2Ie8aoQ>  
Contraseña:SPWW20

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# Other Supports

- Individual support for parents and caregivers
- Community-wide wellness events and activities
- Partnering with other agencies to deliver wellness services to parents across the city
- Parent workshops

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# Connecting with us

Ghislaine Toussaint-Green

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O) 202-727-8464 (C) 202-597-2908

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District of Columbia Department of Behavioral Health



# Parent Infant Early Childhood Enhancement Program (P.I.E.C.E.) & Physician's Practice Group



Department of Behavioral Health  
Child and Youth Services Division  
Shermain M. Bowden, LICSW  
Program Manager



# Parent Infant Early Childhood Enhancement Program

There are two main focuses of the P.I.E.C.E Program:

- ▶ Early Childhood Intervention & Treatment Services
- ▶ The Infant and Maternal Health



# Parent Infant Early Childhood Enhancement Program

## Early Childhood Intervention and Treatment Services

- ▶ This program is consistent with research, which promotes the belief that early childhood intervention programs have the potential to alter cognitive emotional and behavioral skills in the lives of young children
- ▶ We service children 7.6 years of age and under and their families
- ▶ The program mission is to provide culturally competent-community based mental health services to infants, toddlers and school-age children that are responsive to individual family needs



# Parent Infant Early Childhood Enhancement Program

- ▶ The P.I.E.C.E. program provides evidence-based interventions to parents, caregivers and children from diverse backgrounds that support learning and development, specifically in domains that increase success in preschool and early elementary school.
- ▶ The goal is to intervene early with comprehensive services designed to prevent social emotional/behavioral challenges and/or reduce stressors within the parent-child relationship and family from adversely affecting the developing child.



# Parent Infant Early Childhood Enhancement Program

## Clinical Interventions

- ▶ Assessment/Diagnosis
- ▶ Individual Psychotherapy
- ▶ Groups: Parent Psycho-educational and Child Behavior Management Groups
- ▶ Family Therapy
- ▶ Art/Play Therapy
- ▶ Developmental Screenings
- ▶ Crisis Intervention
- ▶ Psychological Evaluations (only after admission, and indicated need)



# Parent Infant Early Childhood Enhancement Program

## Service Coordination

- ▶ Referral, Linkage, and Follow-Up
- ▶ Home visits
- ▶ Consultation:
  - ▶ Schools/ Daycares
  - ▶ DCPS & Department of Health
    - ▶ Help Me Grow
    - ▶ Strong Start/Early Stages
  - ▶ Child and Family Services (CFSA)
  - ▶ Other Community Based Organizations



## Parent Infant Early Childhood Enhancement Program

- ❑ Our practices are consistent with research which promotes the belief that early childhood intervention programs have the potential to alter cognitive, emotional and behavioral skills in the lives of young children.
- ❑ The two evidence-based interventions that we provide are:
  - ▶ Parent Child Interaction Therapy (PCIT)
  - ▶ Child Parent Psychotherapy (CPP)



## P.I.E.C.E. Evidence-Based Practices

- ▶ *Parent Child Interactive Therapy (PCIT), a play therapy evidence-based practice that strengthens the relationship between parent/caregiver and the child;*
- ▶ *Reducing disruptive behavior*
- ▶ *Build parental/caregiver confidence in managing and supervising their child's behavior*





# P.I.E.C.E. Evidence-Based Practices

- ▶ *Child Parent Psychotherapy (CPP), is a therapy for parents with infants, toddlers and preschoolers who have experienced trauma(s). Parents and their children meet with a trained CPP therapist to talk, play and to learn and decide on the best ways to help their family heal after the trauma.*
- ▶ *The goal of CPP is to help parents and their child feel safe and to strengthen their bond so that the child can meet their full potential despite their experiences*



## Areas of Focus for Infant and Maternal Health Component

- ▶ Parent Psycho-education
  - ▶ Child Development
  - ▶ Potty Training
  - ▶ Importance of Play
  - ▶ Child Behavioral Management
- ▶ Self-help
  - ▶ Employment, education, housing
  - ▶ Other parental stressors



## P.I.E.C.E. Infant and Maternal Health Program

- ▶ This program began as a collaboration between the DBH and DOH. This program focuses on women of childbearing age who reside in Wards 5, 6, 7 and 8, with children between the ages of zero - 2 years old
- ▶ Its mission is to reduce infant mortality by improving the emotional, mental and physical health of pre and post-natal women
- ▶ To reduce child abuse and neglect
- ▶ To ensure that women who reside in these areas are receiving comprehensive mental health/psychiatric and medical services
- ▶ This component is designed to improve the parent-child dyad through the strengthening of bonding and attachment
- ▶ Mothers are identified through depression screening (PHQ-9)
  - ▶ Ex: diagnosed as having a depressive disorder or other behavioral health challenges



# Treatment Rooms





# Treatment Rooms



# Treatment Rooms



## Physician Practice Group (Urgent Care Clinic)

- ▶ We serve children ages 6-21 with complex emotional, behavioral and mental health challenges who reside in the District of Columbia
- ▶ Urgent Care medication/somatic services:
  - ▶ Psychological/Psychiatric Evaluations
  - ▶ Medication Assessments
  - ▶ Brief Case Management
  - ▶ Referral, Linkage and Follow-up



# Referrals to P.I.E.C.E. and PPG

- ▶ Located at 821 Howard Rd SE  
Washington, DC 20020

## P.I.E.C.E. Referrals

- ▶ Ms. Woolen/ Mrs. Woodberry
- ▶ 202-698-1838

## ▶ PPG Referrals

- ▶ 202-698-1838





# Questions?



# Next Section: Roundtable on Maternal Mental Health

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- **Format**

- Please use the “raise hand” feature to speak
  - You need to put your hand down as it transitions to another subject
- Please limit your responses to 2 minutes
  - *We have some key topics to get through and dozens of people in the meeting*

- **Logistics**

- Facilitator will call on those with hands raised
  - We may not be able to call on everyone on the subject
  - If you are having audio issues, if you did not get called on, or have more to offer beyond 2 minutes, please put your input into the Chat box
- Any responses beyond the realm of the Chat box and verbal testimony can be submitted in writing to [dhcf.maternalhealth@dc.gov](mailto:dhcf.maternalhealth@dc.gov)

## PROVIDER KNOWLEDGE: Maternal Mental Health Services

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- Question for Doulas: **How much did you know about local mental health services before this presentation?**
  - **Would you like to learn more?**
- Question for Doulas: **Do you have any training or experience screening for mental health issues?**
  - **Would you be interested in receiving it, if offered?**

## PROVIDER EXPERIENCE: Maternal Mental Health Services

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- Question for all providers: **Have you referred anyone to mental health services of any kind?**
  - What was the client's general experience, if you can share?
- Question for Doulas: **Have you ever had a client who started work with you with severe mental health issues?**
  - Please share any lessons and experiences with the group

# OPEN QUESTION: Opportunities to Improve Maternal Mental Health

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- Question: **What opportunities do you see for providers to improve maternal mental health services?**
  - Please emphasize opportunities to coordinate, bill, do outreach, etc. *rather than suggesting new services* through DHCF
  - Asking in light of new Medicaid eligibility 1 year after pregnancy and the new Doula Services benefit

# Update on Maternal Health Advisory Group Work

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- **Doula Enrollment and Billing Subgroup: August 8<sup>th</sup>, 11 AM**
  - Sharing of current status and current thinking on doula enrollment requirements
  - Collect stakeholder input on training and outreach necessary to enroll doulas and get them billing in early October
- **Future Meetings: TBD**
  - Will be called as-needed in relationship to implementation, SPA development, and stakeholder feedback.

# Wrap Up

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- Next meeting date is Monday, August 8<sup>th</sup> at 11 AM
- Calendar invite will be updated just after the meeting

